

Images in clinical medicine

Bilateral hemothorax secondary to adrenal hemorrhage

 Ashwin Karnan,  Babaji Ghewade

Corresponding author: Ashwin Karnan, Department of Respiratory Medicine, Datta Meghe Institute of Higher Education and Research, Sawangi (Meghe), Wardha, Maharashtra, India. ashwin2700@gmail.com

Received: 31 Jan 2024 - **Accepted:** 05 Mar 2024 - **Published:** 22 Mar 2024

Keywords: Cortisol, hemorrhage, pleural effusion, adrenal malignancy

Copyright: Ashwin Karnan et al. Pan African Medical Journal (ISSN: 1937-8688). This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Cite this article: Ashwin Karnan et al. Bilateral hemothorax secondary to adrenal hemorrhage. Pan African Medical Journal. 2024;47(130). 10.11604/pamj.2024.47.130.42845

Available online at: <https://www.panafrican-med-journal.com//content/article/47/130/full>

Bilateral hemothorax secondary to adrenal hemorrhage

Ashwin Karnan^{1,&}, Babaji Ghewade¹

¹Department of Respiratory Medicine, Datta Meghe Institute of Higher Education and Research, Sawangi (Meghe), Wardha, Maharashtra, India

&Corresponding author

Ashwin Karnan, Department of Respiratory Medicine, Datta Meghe Institute of Higher Education and Research, Sawangi (Meghe), Wardha, Maharashtra, India

Image in medicine

A 24-year-old male presented to our emergency department with complaints of difficulty in breathing, and left-sided abdominal and flank pain associated with generalized weakness for the past 6 days. Computed tomography showed bilateral pleural effusion of 51HU suggestive of hemothorax with an ill-defined heterogenous mass lesion in the left suprarenal region with free fluid in the abdomen. Ultrasound-guided (USG) pigtail was done for the left pleural effusion. Embolization of the bleeding vessel was done and the patient was

taken for emergency laparotomy. Biopsy from the mass lesion showed adrenal cortical carcinoma. Adrenal hemorrhage is characterized by bleeding into the suprarenal glands. The adrenals derive rich arterial supply from three main arteries namely the superior, middle, and inferior suprarenal arteries. Biochemical markers include

hyponatremia, hyperkalemia, hypoglycemia, anemia, and leukocytosis. Adrenal hemorrhage may be the initial presentation of an underlying adrenal mass lesion. Treatment modalities and prognosis are variable depending upon the etiology. Complications include retroperitoneal hemorrhage and hypovolemic shock.

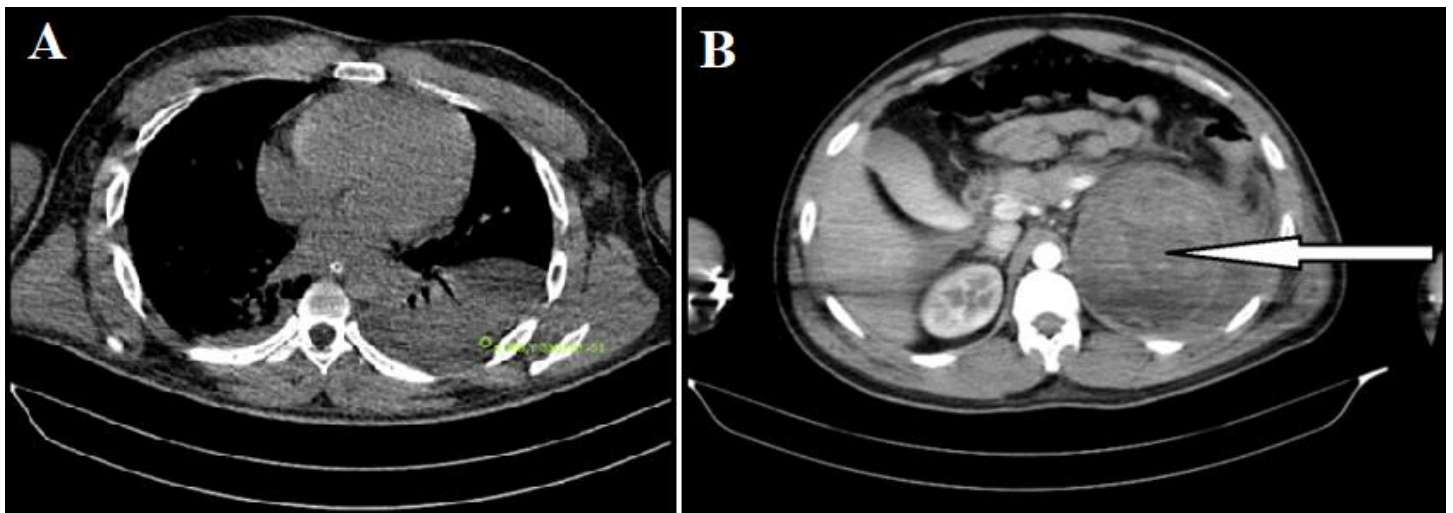


Figure 1: A) computed tomography showing bilateral pleural effusion with high attenuation 51HU; B) computed tomography showing heterogenous mass lesion in the left supra renal region marked by white arrow